they are equal to or exceed \$5,000. In addition, Utah proposed to waive this payment requirement for high risk pregnant women.

The issues in this matter are whether Utah SPA 93–033 adheres to the Federal law at section 1902(a)(14) of the Act (referencing section 1916 of the Act), section 1902(l) and section 1902(a)(17).

I am scheduling a hearing on your request for reconsideration to be held on May 17, 1995, in Room 578, 1961 Stout Street, Denver, Colorado. If this date is not acceptable, we would be glad to set another date that is mutually agreeable to the parties. The hearing will be governed by the procedures prescribed at 42 CFR, Part 430.

I am designating Mr. Stanley Katz as the presiding officer. If these arrangements present any problems, please contact the residing officer. In order to facilitate any communication which may be necessary between the parties to the hearing, please notify the presiding officer to indicate acceptability of the hearing date that has been scheduled and provide names of the individuals who will represent the State at the hearing. The presiding officer may be reached at (410) 597–3013.

Sincerely, Bruce C. Vladeck, Administrator.

(Section 1116 of the Social Security Act (42 U.S.C. 1316); 42 CFR section 430.18) (Catalog of Federal Domestic Assistance Program No. 13.714, Medicaid Assistance Program)

Dated: March 30, 1995.

# Bruce C. Vladeck,

Administrator, Health Care Financing Administration.

[FR Doc. 95–8524 Filed 4–6–95; 8:45 am] BILLING CODE 4120–01–P

### **Public Health Service**

Centers for Disease Control and Prevention; Statement of Organization, Functions, and Delegations of Authority

Part H. Chapter HC (Centers for Disease Control and Prevention) of the Statement of Organization, Functions, and Delegations of Authority of the Department of Health and Human Services (45 FR 67772-76, dated October 14, 1980, and corrected at 45 FR 69696, October 20, 1980, as amended most recently at 59 FR 63406-62407, dated December 5, 1994) is amended to reflect the transfer of the Division of HIV/AIDS, excluding the Hematologic Diseases Branch, Immunology Branch, and Laboratory Investigations Branch, from the National Center for Infectious Diseases to the National Center for Prevention Services.

Section HC-B, *Organization and Functions*, is hereby amended as follows:

Delete in its entirety the title and functional statement for the *Division of HIV/AIDS (HCRK)*.

Following the functional statement for the *Division of Oral Health (HCM6), Office of the Director (HCM61),* insert the following:

Division of HIV/AID (HCM7). (1) Conducts national surveillance of infectious diseases and other illnesses associated with human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/ AIDS), and sentinel surveillance of HIV infection; (2) conducts national and international surveillance, epidemiologic investigations, and studies to determine risk factors and transmission patterns of HIV/AIDS; (3) develops recommendations and guidelines on the prevention and control of HIV/AIDS; (4) evaluates prevention and control activities in collaboration with other CDC components; (5) provides epidemic aid, epidemiologic and surveillance consultation, and financial assistance for HIV/AIDS surveillance activities to State and local health departments; (6) provides consultation to other PHS agencies, medical institutions, and private physicians; (7) provides information to the scientific community through publications and presentations; (8) works closely with NCID on HIV/ AIDS surveillance activities and epidemiologic studies that require laboratory support and collaboration.

Office of the Director (HCM71). (1) Plans, directs, and coordinates the activities of the Division; (2) develops goals and objectives and provides leadership, policy formulation, and guidance in program planning and development; (3) provides program management and administrative support services for HIV/AIDS activities, both domestic and international.

International Activity (HCM712). (1) Designs and executes epidemiologic studies of HIV infection in developing nations of Africa and other continents; (2) develops and conducts epidemiologic studies of risk factors for AIDS and HIV transmission; (3) provides technical assistance to developing nations to develop AIDS case surveillance systems; (4) assists foreign governments in carrying out seroprevalence studies and surveys; (5) implements strategies to protect the blood supply in developing countries; (6) assists in the design, implementation, and evaluation of AIDS prevention and control activities; (7) performs epidemiologic studies of HIV/ AIDS interventions in foreign countries; (8) coordinates with other CIOs in CDC that have similar international

responsibilities; (9) provides consultation to WHO, USAID, and AIDSTECH, and other organizations whose mission is to prevent and control HIV infection and related outcomes.

Technical Information Activity (HCM713). (1) Provides scientific information, in cooperation with other CDC organizations, to health-care professionals, public health officials, and the general public; handles controlled and general correspondence and prepares responses to Freedom of Information Act requests; (2) coordinates preparation of responses and provision of material requested by Congress: (3) coordinates preparation of documents for annual program review with the Directors of NCPS and CDC; (4) prepares HIV/AIDS briefing reports for Director, CDC, and the Assistant Secretary for Health; (5) prepares printed and audiovisual materials on HIV/AIDS in cooperation with other CDC organizations; (6) assists in preparing guidelines for prevention of HIV infection; (7) maintains library of HIV/AIDS reprints and MMWR articles and distributes on request; (8) coordinates requests for presentations at scientific, medical, and public health meetings; (9) assists in preparing, editing, and clearing manuscripts; (10) plans and arranges for HIV/AIDS conferences and scientific meetings sponsored by CDC.

Epidemiology Branch (HCM72). (1) Designs and conducts epidemiologic studies to determine risk factors, cofactors, and modes of transmission for AIDS and HIV infection; (2) conducts epidemic aid investigations of HIV infection, infectious disease, and other illnesses associated with HIV/AIDS; (3) conducts technical reviews of proposals submitted for epidemiologic studies, arranges for ad hoc panel reviews, and recommends funding levels; (4) provides epidemiologic consultation to State and local health departments, other PHS agencies, and other groups and individuals investigating the syndrome; (5) responds to inquiries from physicians and other health providers for information on the medical and epidemiologic aspects of

Pediatric and Family Studies Section (HCM722). (1) Designs and conducts epidemiologic studies of AIDS and HIV infection that examine risk factors, modes of transmission, and the natural history of disease in children, adolescents, mothers, and other family members; (2) develops guidelines and recommendations to reduce transmission in these populations, particularly aspects related to transmission from mother to child and

the effects of pregnancy on infected women; (3) conducts epidemic investigations of infectious diseases and other illnesses associated with AIDS and HIV infection related to these populations; (4) provides technical assistance to medical professionals, health departments, the mass media, and the public on various issues concerning the HIV/AIDS epidemic and its effect on these population groups.

Social and Behavioral Studies Section (HCM723). (1) Designs and conducts social, psychological, and behavioral studies of AIDS and HIV infection that examine cognitive, social, and environmental influences on behaviors associated with the transmission of HIV and development of life-threatening disease; (2) develops guidelines and recommendations to reduce transmission of HIV and the development of AIDS; (3) assists biomedical and epidemiologic researchers in investigations of infectious diseases associated with AIDS and HIV infection; (4) provides technical assistance to social, behavioral, and biomedical scientists, health departments, universities, the mass media, and the public on social and behavioral aspects of the HIV/AIDS epidemic

Special Studies Section (HCM724). (1) Designs and conducts epidemiologic studies examining the natural history of HIV infection and AIDS and the efficiency of, and risk factors for, the transmission of HIV by homosexual, heterosexual, or bloodborne routes (i.e., transfusion, organ transplantation, or needle-sharing); (2) conducts epidemic investigations of infectious diseases and other illnesses associated with AIDS and HIV infection in these risk groups; (3) develops guidelines and recommendations to reduce HIV transmission in these affected populations; (4) provides technical assistance to medical professionals, health departments, the mass media, and the public on various issues concerning the HIV/AIDS epidemic in these populations; (5) develops and maintains systems for the laboratory monitoring of specimens for human immunodeficiency virus type 2 (HIV-2) infection in the United States and conducts epidemiologic investigations of identified cases.

Field Services Branch (HCM73). (1)
Serves as the focus for the Division of HIV/AIDS in carrying out field initiatives and programs with State and local health departments; (2) assists the Surveillance, HIV Seroepidemiology, and Statistics and Data Management Branches in implementing and maintaining HIV/AIDS surveillance

activities and HIV seroprevalence surveys and studies at the State and local level; (3) administers and tracks the surveillance and seroprevalence components of combined AIDS Prevention and Surveillance cooperative agreements with State and local health departments; (4) works with the Office of the Division Director and the Procurement and Grants Office in processing cooperative agreements and contracts; (5) negotiates field assignments of public health advisors with State and local health officials and provides supervision and training for the advisors; (6) provides training, technical assistance, and consultation to State and local health departments; (7) consults and collaborates with other CDC organizations to assure efficient and effective utilization of available resources.

Consultation Section (HCM732). (1) Assists the Surveillance, HIV Seroepidemiology, and Statistics and Data Management Branches in implementing projects related to HIV/ AIDS surveillance and serosurveys; (2) coordinates, reviews, and conducts program negotiations and participates in budget negotiations for HIV/AIDS surveillance and seroprevalence cooperative agreement applications; (3) serves as the Division focal point for communications with State and local health departments and the PHS Regional Offices regarding HIV/AIDS surveillance and seroprevalence surveys and studies; (4) works closely with the medical epidemiologists of the Surveillance and HIV Seroepidemiology Branches to ensure local adherence to surveillance and serosurvey protocols and program guidelines; (5) identifies projects needing on-site epidemiologic assistance from the Surveillance and HIV Seroepidemiology Branches and provides coordination of required onsite visits; (6) monitors, maintains, and follows surveillance and seroprevalence activities (including no identified risk cases) conducted by recipients of HIV/ AIDS cooperative agreement funds in collaboration with the Surveillance and HIV Seroepidemiology Branches; (7) negotiates field assignments of public health advisors with State and local health officials, provides support and supervision of field assignees, and conducts site reviews and evaluations of State and local HIV/AIDS surveillance and seroprevalence programs to identify and assist in resolving problems.

Training Section (HCM733). (1) Serves as Division resource in conducting meetings, conferences, and workshops; (2) plans, conducts, and evaluates training and development of public health advisor field assignees; (3)

determines training needs and plans, and conducts and coordinates surveillance and seroprevalence training courses for State and local health department staff; (4) develops surveillance and seroprevalence training and operational manuals and guidelines for State and local personnel.

HIV Seroepidemiology Branch (HCM74). (1) Plans, develops, and coordinates HIV clinic and special surveys and population studies in selected geographic areas; (2) provides data and serves as the focus for information about the extent of HIV prevalence and incidence in the U.S.: (3) collaborates and provides technical assistance to public and private organizations regarding HIV seroprevalence; (4) works closely with other CDC organizations in applying prevalence and incidence data to target and evaluate HIV prevention programs; (5) works with the Surveillance Branch and the Statistics and Data Management Branch to evaluate HIV/AIDS trends in incidence and prevalence projections; (6) collaborates and works closely with the Field Services branch to effectively implement and evaluate CDC-funded HIV seroprevalence surveys.

Clinic and Special Surveys Section (HCM742). (1) Designs, monitors, and evaluates HIV seroepidemiologic surveys and studies in health care sites such as sexually transmitted disease, tuberculosis, drug treatment, and women's health clinics, and in additional selected populations; (2) provides guidance, technical assistance, and consultation to the Field Services Branch and State and local health departments in implementing clinic and special surveys and studies; (3) ensures the collection and analysis of HIV prevalence data; (4) prepares MMWR and other scientific articles and report related to HIV prevalence and trends of HIV infection in selected health care facilities; (5) provides technical assistance to and coordination with CDC organizations in interpreting and utilizing seroprevalence data to implement and evaluate HIV prevention programs.

Population Studies Section (HCM743). (1) Designs, implements, monitors, and evaluates seroepidemiologic surveys and studies among populations such as childbearing women, hospital clients, blood donors, civilian applicants for military services, Job Corps entrants, patients of family practitioners, and Native Americans; (2) ensures the analysis of HIV prevalence data in these populations; (3) coordinates, reviews, and participates in budget and program negotiations of HIV seroprevalence cooperative agreement

applications and contract proposals; (4) provides on-site technical assistance and consultation to grantees and contractors, including State and local health departments, hospitals, universities, blood centers, and private organizations, and other Federal agencies such as the Departments of Defense and Labor, and the Indian Health Service; (5) administers cooperative agreements and contracts for HIV seroprevalence and studies; (6) prepares MMWR and scientific articles and reports related to the incidence and prevalence of HIV infection among selected populations; (7) provides technical assistance and consultation to the Field Services Branch and to other CDC organizations and other agencies interpreting and utilizing seroprevalence data to implement and evaluate HIV prevention programs.

Statistics and Data Management Branch (HCM75). (1) Manages, directs, and coordinates the activities of the Statistics and Data Management Branch; (2) provides leadership in the development of Branch planning, policy, implementation, and evaluation; (3) provides data management and statistical support for AIDS/HIV surveillance, HIV serosurveys, and epidemiologic studies; (4) develops, negotiates, monitors, and evaluates projects to construct mathematical models of the spread of AIDS and HIV infection; (5) creates mathematical models to project the incidence of AIDS and HIV infection; (6) provides statistical models of epidemiologic parameters to describe the efficiency of HIV transmission and the incubation time for AIDS; (7) responds to inquiries from medical professionals, health departments, the media, and the public about AIDS epidemic statistical issues, including projections of the number of AIDS cases and estimates of persons infected with HIV.

Seroepidemiology Support Section (HCM752). (1) Provides data management support for the HIV Family of Surveys, including receipt and acknowledgment of electronically transmitted data, entry of hard copy data, editing, uploading, and producing standard data analyses; (2) coordinates, in collaboration with the HIV Seroepidemiology Branch, the development and operation of data management systems for HIV surveys and studies; (3) designs and develops microcomputer-based software for clinics, hospitals, State laboratories and health departments to use in managing data collected from a variety of HIV prevalence surveys; (4) provides consultation and computer programming assistance to project

officers in analyzing data from their respective surveys and studies; (5) assists the HIV Seroepidemiology Branch and Section Chiefs in preparing summaries of analyses and reports of Family of Surveys data; (6) recommends mainframe and microcomputer hardware and software that will be required to support the National HIV Seroprevalence Surveys data management.

Statistics Section (HCM753). (1) Provides statistical support in the design and analysis of data from epidemiologic studies; (2) provides statistical support in estimating the prevalence of HIV infection in a variety of survey populations; (3) develops statistical models describing changes in the prevalence of HIV infection over time; (4) assists the Surveillance Branch in the analysis of trends in HIV/AIDS surveillance data by different demographic and patient risk characteristics; (5) supplies a large number of statistical services to division components, including the review of statistical methods in manuscripts, production of standardized statistical reports and additional data analysis; (5) creates mathematical models to project the incidence of AIDS and HIV infection; (7) provides statistical models of epidemiologic parameters to describe the efficiency of HIV transmission and the incubation time for AIDS

Surveillance Support Section (HCM754). (1) Coordinates, in collaboration with the Surveillance Branch, the development and operation of data management systems for HIV surveys and studies; (2) designs and develops microcomputer-based data management software used by State and local health departments for collecting and reporting HIV/AIDS surveillance data; (3) provides user manuals and telephone support to health department personnel using CDC-developed software; (4) designs, implements, and supports mainframe data systems for HIV/AIDS epidemiologic and surveillance studies; (5) provides consultation and computer programming assistance to project officers in analyzing data from their respective surveys and studies; (6) prepares, distributes, and supports public information data sets containing HIV/AIDS surveillance and epidemiologic statistical findings for the world research community; (7) recommends hardware and software packages that will be required to support the national AIDS/HIV surveillance.

Systems and Hardware Support Section (HCM755). (1) Designs, implements, and supports data systems for HIV/AIDS epidemiologic and laboratory studies, both in the United States and in overseas sites; (2) creates and maintains data entry and management systems for use by collaborating health departments and research organizations; (3) codes and enters data collected from HIV/AIDS research studies into CDC's computers; (4) supports office automation hardware and software; (5) recommends and supports hardware and software used for data management, data analysis, networking, word processing, and desktop publishing.

Surveillance Branch (HCM76). (1) Conducts national surveillance of AIDS cases in coordination with State/local health departments; (2) maintains national confidential registry of cases; (3) monitors adult and pediatrics HIVrelated mortality and morbidity and AIDS risk-group trends; (4) develops additional methods of surveillance of HIV and HIV-related disease; (5) evaluates surveillance systems for HIVrelated disease and modifies surveillance and methodologies as needed to meet changing needs of AIDS programs at the national, State, and local levels; (6) provides consultation and technical assistance on surveillance activities to State and local health departments; (7) provides international consultation on surveillance and epidemiology of HIV/AIDS

Reporting and Analysis Section (HCM762). (1) Conducts national surveillance of HIV/AIDS; (2) develops and distributes surveillance guidelines, case definitions, and case report forms in coordination with State/local health departments; (3) maintains national confidential registry of cases; (4) conducts routine analysis of surveillance data and disseminates information on morbidity, mortality, and AIDS risk-group trends, and survival trends; (5) collaborates with the Statistics and Data Management Branch in the projection of HIV/AIDS trends through mathematical modeling; (6) in collaborating with other NCPs programs, evaluates State and local case reporting systems for HIV-related disease, including impact of State laws on reporting and modifications in reporting criteria; (7) assists with responses to public inquiries; (8) provides technical direction to the HIV Seroepidemiology Branch in monitoring surveillance programs at the State level.

Special Projects Section (HCM763). (1) Develops alternative methods of surveillance for spectrum of HIV-related disease; (2) conducts selected analyses of HIV-related morbidity and mortality data to determine at-risk populations, risk factors, survival trends, etc., and

disseminates results through publications and presentations; (3) updates criteria for reporting pediatric and adult cases; (4) assists the Reporting and Analysis Section with studies to evaluate the completeness, timeliness, and other aspects of reporting; (5) collaborates with other NCPS programs in the epidemiologic investigations of atypical or unusual HIV/AIDS cases.

Effective Date: March 28, 1995.

#### David Satcher.

Director, Centers for Disease Control and Prevention.

[FR Doc. 95–8634 Filed 4–6–95; 8:45 am]

### **DEPARTMENT OF THE INTERIOR**

Bureau of Land Management [AZ-050-05-1430-00; AZA 29060]

Arizona: Realty Action, Recreation and Public Purposes (R&PP) Act Classification; Mohave County, Arizona

**AGENCY:** Bureau of Land Management, Interior.

**ACTION:** Notice of Realty Action.

SUMMARY: The following public lands in Mohave County, Arizona, have been examined and found suitable for classification for lease or conveyance, under the provisions of the Recreation and Public Purposes (R&PP) Act of June 14, 1926, as amended (43 U.S.C. 869 et seq.). The lands will not be offered for lease or conveyance until at least 60 days after the date of publication of this notice in the Federal Register. The lands described below have been developed by the Arizona State Parks Department (State Parks) for park purposes, and are currently in use for that purpose. The lands are currently leased to State Parks by the United States pursuant to Reclamation lease authority, and particularly pursuant to the Acts of June 17, 1902, (32 Stat. 388) and August 4, 1939, (53 Stat. 1187, 1196), as amended by the Act of August 18, 1950, (64 Stat. 463). This action will allow lease or conveyance of lands to State Parks under current and more appropriate R&PP Act authority. All legal descriptions are within the Gila and Salt River Meridian, Arizona. The following lands are hereby classified suitable for lease to State Parks:

## 1. Cattail Cove State Park

T. 12 N., R. 18 W.,

Sec. 19, that portion of lot 4 acquired for use by the Bureau of Reclamation (approximately 18 acres);
T. 12 N., R. 19 W.,

Sec. 25, lots 1, 2 & 3, NE<sup>1</sup>/<sub>4</sub>NE<sup>1</sup>/<sub>4</sub> (136.82 acres).

Containing 154.82 acres, more or less.

#### 2. Lake Havasu State Park

T. 13 N., R. 20 W.,

Sec. 23, lots 2 & 3, E<sup>1</sup>/<sub>2</sub>SW<sup>1</sup>/<sub>4</sub>, W<sup>1</sup>/<sub>2</sub>W<sup>1</sup>/<sub>2</sub>SE<sup>1</sup>/<sub>4</sub>, SE<sup>1</sup>/<sub>4</sub>NW<sup>1</sup>/<sub>4</sub>SE<sup>1</sup>/<sub>4</sub>, E<sup>1</sup>/<sub>2</sub>SW<sup>1</sup>/<sub>4</sub>SE<sup>1</sup>/<sub>4</sub>, SE<sup>1</sup>/<sub>4</sub>SE<sup>1</sup>/<sub>4</sub>.

Containing 239.39 acres, more or less.

Total lands classified suitable for lease is 394.21 acres, more or less. The following public lands are hereby classified suitable for conveyance to State Parks:

### 1. Buckskin Mountain State Park

T. 11 N., R. 18 W.,

Sec. 32, All, excepting that portion of the SW<sup>1</sup>/<sub>4</sub> lying west of Arizona State Highway 95 as rerouted (approximately 400 acres);

Sec. 33, lots 10, 11, and 12, S½NW¼, S½ (507.38 acres).

Containing 907.38 acres, more or less.

#### 2. Cattail Cove State Park

T. 12 N., R. 18 W.,

Sec. 19, All excepting that portion of lot 4 acquired for use by the Bureau of Reclamation (approximately 600 acres);

Sec. 20, W½, excepting that portion east of Arizona State Highway 95 (approximately 200 acres);

Sec. 29, All, excepting that portion east of Arizona State Highway 95 (approximately 500 acres); Sec. 30, All (481.42 acres);

T. 12 N., R. 19 W.,

Sec. 24, All (628.20 acres).

Containing 2409.62 acres, more or less.

### 3. Lake Havasu State Park

T. 13 N., R. 20 W.

Sec. 23, lot 5, NE¹/4SE¹/4, NE¹/4NW¹/4SE¹/4 (61.33 acres);

Sec. 26, lots 1–4,  $NE^{1/4}$  (290.93 acres). Containing 352.26 acres, more or less.

Total lands classified suitable for conveyance is 3669.26 acres, more or less. Total lands classified for lease or conveyance is 4063.47, more or less.

The final lease or patent documents will reflect resurvey and revised descriptions of certain parcels. The lands are not needed for Federal purposes. Lease or conveyance conforms to the Yuma District Resource Management Plan and would be in the public interest.

Leases or patents, when issued, will be subject to the following terms, conditions, and reservations:

- 1. Provisions of the Recreation and Public Purposes Act and to all applicable regulations of the Secretary of the Interior.
- 2. A right-of-way for ditches and canals constructed by the authority of the United States.
- 3. All minerals shall be reserved to the United States, together with the

right to prospect for, mine, and remove materials.

4. All prior and existing rights.

- 5. All lands adjacent to Lake Havasu below 450 feet above mean sea level are excepted and reserved to the United States for the operation of Parker Dam and Lake Havasu.
- 6. An inundation easement is reserved to the United States for all parcels adjacent to Lake Havasu for those lands between 450 and 455 feet above mean sea level for the operation of Parker Dam and Lake Havasu.

7. An inundation easement is reserved to the United States for those lands adjacent to the Colorado River downstream from Parker Dam for the operation of Parker and Headgate Dams.

Detailed information concerning this action is available for review at the office of the Bureau of Land Management, Yuma District, Havasu Resource Area, 3189 Sweetwater Avenue, Lake Havasu City, Arizona. Upon publication of this notice in the **Federal Register**, the lands will be segregated from all forms of appropriation under the public land laws, including the general mining laws, except for lease or conveyance under the R&PP Act and leasing under the mineral leasing laws. For a period of 45 days from the date of publication of this notice in the **Federal Register**, interested persons may submit comments regarding the proposed lease/ conveyance or classification of the lands to the Area Manager, Havasu Resource Area Office, 3189 Sweetwater Avenue, Lake Havasu City, AZ 86406.

**CLASSIFICATION COMMENTS:** Interested parties may submit comments on the suitability of the lands for park purposes. Comments on the classification are restricted to whether the land is physically suited for the proposal, whether the use will maximize the future use or uses of the land, whether the use is consistent with the local planning and zoning, or if the use is consistent with State and Federal programs. Any adverse comments will be reviewed by the Arizona State Director, Bureau of Land Management, who may sustain, vacate, or modify this realty action. In the absence of any adverse comments, the classification will become effective 60 days from the date of publication of this notice in the Federal Register.

**APPLICATION COMMENTS:** Interested parties may submit comments regarding the specific use proposed in the application and plan of development, whether the BLM followed proper administrative procedures in reaching the decision, or any other factor not